

PERMIT # _____

OWNER _____ PHONE _____

HOME ADDRESS _____

JOB SITE LOCATION _____

TOWNSHIP _____ QTR _____ SECTION _____ TWP _____ RANGE _____

ZONING DISTRICT: (CIRCLE) A-1 AR-1 R-1 R-2 C-1 C-2 M-1 M-2 PUD

LOT SIZE _____ LOT DIMENSIONS _____

PROPOSED BUILDING: DWELLING _____
HOME ADDITION _____
OTHER PRINCIPAL BUILDING _____
ACCESSORY BUILDING _____

IF BUILDING IS NOT A HOME- SPECIFY USE _____

BUILDING SIZE _____ SQ FT BUILDING DIMENSIONS _____

HEIGHT _____ FEET _____ SETBACKS-FRONT _____ RIGHT SIDE _____ LEFT SIDE _____ REAR _____

ESTIMATED COST OF CONSTRUCTION _____ IS THIS COST-MATERIAL AND LABOR _____
OR MATERIAL ONLY _____

WASTE WATER DISPOSAL SYSTEM		TYPE OF WATER SUPPLY	
PRIVATE SEPTIC	_____	PRIVATE WELL	_____
PUBLIC SYSTEM	_____	PUBLIC SUPPLY	_____
OTHER	_____	OTHER	_____

APPROVAL CHECKLIST-VERIFY THAT THESE BASIC ZONING REQUIREMENTS HAVE BEEN MET-

DOES THIS LOT COMPLY WITH THE MINIMUM SIZE REQUIREMENTS FOR THIS ZONING DISTRICT? Y N

IF LOCATION IS IN THE A-1 OR AR-1 ZONING DISTRICTS, IS A LIVESTOCK FEEDLOT OR CONFINEMENT BUILDING WITHIN 1320 FEET?	Y	N
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IF THIS LOT IS LOCATED IN THE A-1 OR AR-1 ZONING DISTRICTS, DOES MORE THAN 25% OF THE SOIL HAVE A CSR OF GREATER THAN 60?	Y	N

IS THIS BUILDING SITE LOCATED IN A FLOODPLAIN? Y N

DOES THIS BUILDING REQUIRE AN OCCUPANCY PERMIT Y N

IS THIS LOT SUBJECT TO THE CLINTON COUNTY SUBDIVISION REGULATIONS? Y N

IF YES, HAS THIS LOT RECEIVED THE NECESSARY APPROVALS?	Y	N
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HAS A SITE PLAN BEEN INCLUDED WITH THIS APPLICATION? Y N

STATE LAW REQUIRES THAT IOWA ONE CALL (1-800-292-8989) BE NOTIFIED
48 HOURS PRIOR TO THE START OF ANY DIGGING. ARE YOU AWARE OF THIS? Y N

OVER

I understand that this permit will be issued on the basis that all the information provided on this application is correct and agree that all construction and uses will comply with the Clinton County Master Plan, Zoning Ordinance, Subdivision Regulations, and Flood Plain Ordinance. All provisions of laws and ordinances governing this occupancy will be complied with whether specified or not. The granting of this permit does not presume to give authority to violate or cancel the provisions of any state or local law, ordinance or regulation. Violation of any of these ordinances or laws shall result in revocation of the permit; the application of any penalties listed in the Zoning Ordinance and any building under construction or constructed which is in violation may be required to be removed.

By my signature, I certify that I have read and understand the conditions of this permit. I certify that I am the owner of the property; or have the authority to enter into and bind the owner of the building and/or property to these provisions; and will allow inspection of the building, structure and/or property in order to determine compliance with the applicable Ordinances and Regulations by authorized Clinton County employees.

Authorized signature

[OFFICE USE ONLY]

THIS ZONING PERMIT IS: APPROVED _____ DENIED _____

IF DENIED, REASON FOR DENIAL _____

DATE APPROVED: _____ DATE PERMIT EXPIRES: _____

ZONING ADMINISTRATOR

Notes about additional permits.

New or reconstructed driveways need to be permitted by the Clinton County Engineer's office.
Addresses are issued by the Clinton County Engineer's office. Phone 563-244-0564